

## Monthly Rates for 2016

*Deductions are taken out of 24 bi-weekly checks. Divide by 2 to determine the per pay period deduction(s).*

*Employees under Davis-Bacon should divide rates by 4.*

Plan	Employee Only	Employee & Adult	Employee & Child(ren)	Employee & Family
Health				
Kaiser Permanente CA	60.00	125.00	107.00	172.00
Anthem Blue Cross EPO	311.00	653.00	560.00	902.00
Anthem Blue Cross Plus	556.00	1167.00	1000.00	1611.00
Anthem Blue Cross PPO	375.00	788.00	675.00	1088.00
Anthem Blue Cross HDHP	160.00	336.00	288.00	464.00
Anthem Blue Cross Core Value	54.00	112.00	96.00	155.00
Dental				
Delta Dental PPO (nationwide)	Premium paid by LLNS			
Delta Care USA DMO (California residents only)	Premium paid by LLNS			
Vision				
Vision Service Plan	Premium paid by LLNS			